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TEN YEARS IN OAK RIDGE

Oak Ridge was doubled in size in 1958 to accommodate 304 patients. Ten years ago, 60 patients a year were admitted, now over 300 patients a year are entering and leaving Oak Ridge.

Year by year, we have seen the program develop in Sak Midge. In 1960, "G" Ward was opened, the Industrial Therapy Department was moved and enlarged; flood lights were installed in the second yard; the school was established; A.A. was formed, patients (mate) began saving themselves; patients in Industrial Therapy doubled from fifteen to thirty.

In 1961, "H" Ward was opened; weekly movies were instituted; the Barrie Volunteers began their program; a skating rink was built; the first concerts were put on by Oak Ridge patients; we had two teachers for a primary and secondary school program; the first A.A. Banquet was held; the patients library was established; the Quill began; group therapy was started; Industrial Therapy Shop patients increased from thirty to forty, and we obtained plans for Scandinavian furniture.

In 1962, the first dance was held; a weekly choir was started; volunteers were coming weekly; there were councils on each ward; the first Appreciation Banquet was attended by over one hundred people with Dr. Jury as guest speaker; Industrial Therapy patients rose from forty to sixty and began making Scandinavian furniture and selling Bird Houses to Eaton's; the athletic board was formed.

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By 1964, there were two or three off ward activities five nights a week; volunteers were visiting twice weekly; Dr. Dymond addressed the Appreciation Banquet.

In 1965, the Oak Ridge patients began their annual cruise on the Penetang 88 through the islands of Georgian Bay with a picnic on Beausoleil Island. The Occupational Therapy Services were established and the "G" Ward Therapeutic Community Program was intensified.

In 1966, "G" Ward held a two night camp on Beckwith Island. Three University students lived as patients on "G" Ward; the Recreation and Sports Program was expanded.

By 1967, there were four wards involved in a Therapeutic Community Program with "F" Ward contributing a compressed encounter therapy. The patients in Industrial Therapy reached one hundred; the LSD Program was started, $3\frac{1}{2}$ Nurses were employed; the Review Board came into operation.

In 1968, the Capsule Program was developed; the Advisory Review Board first reviewed the Warrants of the Lieutenant Governor.

In 1969, the patients Canteen was opened and all patients in hospital industries as well as those in the shops were receiving the token wage. Want AGC+D during a manufacture of the patients of the patients

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Over the ten years, a great many prominent visitors have come to Oak Ridge including Dr. Stuarp of Denmark; Leonard Burton; Joan Hallaban; Dr. Patrick McGran of Brodmar; various visitors from the United States and Canada and some from as far as Switzerland and Burma.

Joan Hall zban, the Medical Reporter for the Globe & Mail has published two feature articles concerning Oak Ridge in the weekly magazine.

There has been an on-going research program started in 1960. In 1961, the Oak Ridge study was completed; an article appeared in the Criminal Law Quarterly in 1962; a paper on homicide was presented in Vancouver in 1964 as well as a paper in Winnipeg. In 1965, a paper on the Therapeutic Community was presented at Edmonton and one on homicide at Halifax. In 1966, two articles on homicide appeared in the Canadian Psychiatric Association Journal and a paper was presented at the Ontario Psychiatric Association Meeting in Guelph. In 1967, there was an investigation of Abnormal Genes in relation to mental patients and LSD. In 1968 a paper on "the 100 day Hate-In" was presented at the Ontario Psychiatric Association in Muskoka. Since then, there has been a series of papers on the Therapeutic Community Program.

Open House attracted an increasing number of visitors to Oak Ridge; in 1960, there were four hundred visitors; by 1969, there were over two thousand three hundred toured Oak Ridge.

The Courts of the Province have been making increasing use of Oak Ridge for examining patients on Warrant of Remand. During the past year, a record number of Court appearances were made by Oak Ridge staff, particularly, Dr. Coulthard. Former Oak Ridge Psychiatrists have moved on to positions of great responsibility; Dr. Saulks is a Clinical Director at the North Bay Psychiatric Hospital; Dr. Orchard is on staff of the Forensic Unit at the Clarke Institute; Dr. Darby is in private practise in Toronto; Dr. McKnight is Chief of the Forensic Services at the Clarke Institute.

Dr. Boyd served on a Canadian Mental Health Association Committee to prepare volumes III of the Law and Mental Disorder - The Criminal Law. In this capacity, he toured the prisons and mental hospitals to the East of Canada; he visited Saskatchewan to consult with authorities in regard to the development of a Penitentiary Medical Centre at Saskatoon; he is a member of a committee to advise the Commissioner of Penitentiaries on matters related to mental health in the penitentiary system; he addressed the Annual meeting of the Saskatchewan Canadian Mental Health Association; he has been Chairman of a Committee to study the Ouimette Committee on Corrections for discussion at the annual meeting of the Canadian Congress of Corrections.

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The programmes developed in Oak Ridge have attracted great interest throughout health services and correctional services.

We have seen a change in policy from indefinite incarceration for the patient under the Lieutenant Governor's Warrant to regular periodic review and released to the community as soon as this is reasonably safe.

We have seen a change in emphasis from custodial to therapeutic gradually occurring over the years. Oak Ridge is still a secure institution with only one escape in twenty years but the emphasis now is primarily on therapy. Most of the ward staff are now keenly interested in treatment methods. This has been aided by the arrival of Nurses', Social Workers, Occupational Therapists, Psychometrists, and more Doctors.

Over this time, all these increased activities have taken place with a relatively small increase in staff and no additional space. Oak Ridge is badly in need of more Office space and rooms for group meetings. We would like to have new shop facilities; we need an auditorium and gymnasium and I notice that the newly Philip McNale Institute in Montreal has a swimming poole. When the new Active Treatment building on the grounds is completed, it is planned that food will be prepared in the Main Kitchen and delivered to Oak Ridge requiring the use of a second entrance.

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Dr B. A. Boyd

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